

**Margaret H. Rollins School of Nursing**  
**N201- Special Populations**  
**Ticket to Enter – High Risk Newborn: Thermoregulation**

1. Why is the preterm infant at risk for hypothermia?
  - A. Amount of brown fat greater than at term
  - B. Decreased amount of subcutaneous fat**
  - C. Less skin surface exposed
  - D. Position of flexion
2. Where is brown fat commonly located? Select all that apply.
  - A. Bilateral axillary areas**
  - B. Buttocks and abdomen
  - C. Near the large intestines
  - D. Near kidneys and adrenals**
3. What is a complication of brown fat metabolism?
  - A. Hyperglycemia
  - B. Hyperthermia
  - C. Hypoxia**
  - D. Metabolic alkalosis
4. What is a consequence of hypothermia in the high-risk infant?
  - A. Decreased respiratory rate
  - B. Increased surfactant production
  - C. Pulmonary vasodilation
  - D. Weight loss or failure to gain weight**
5. Define Neutral Thermal Environment (NTE).
  - The body temperature is maintained with minimal energy (metabolic rate) and minimal oxygen use

**Match the following strategies to the mechanism of heat loss (conduction, convection, evaporation, or radiation) that each intervention addresses.**

6. Open incubator /isolette porthole and doors only when necessary: **Convection**
7. Avoid placement of infant bed near windows, doors, or walls: **Radiation**
8. Place cloth on infant scale before weighing the newborn: **Conduction**
9. Warm inspired oxygen when administering to the neonate: **Convection**

10. Always dry infant immediately after bathing: **Evaporation**